

Emergency Domestic Water Well Financial Assistance Pilot Program

Background

On August 26, 2014 the Stanislaus County Board of Supervisors approved a pilot program to assist domestic/residential well owners that are experiencing “dry well” conditions.

Standards

- This Emergency Loan Program only applies to verifiable rural domestic well failure situations.
- This program cannot be used for unreasonable well upgrades, or pump improvement projects beyond what is reasonably necessary to maintain a potable water supply.
- Residential (owner/resident) eligibility only.
- Loans for retroactive water well repair will not be considered.

Eligibility

- Applicants for loans may have an income of up to 150% of the household median income for Stanislaus County unincorporated area. Note: Median income Stanislaus County \$55,548.
- The program target is the unincorporated, owner occupied, residential parcels.
- Preference will be given to elderly (65 years and older) fixed income residents. Preference in this instance is defined by repayment option as part of estate resolution and/or sale of property.
- Program funds will be distributed on a first-come, first-served basis provided that a fully completed and approved application is in the record.
- Credit worthiness determined with a model of 43% total debt.
- Total secured debt on the property, including the loan amount requested in this application, cannot exceed a total debt-to-value ratio of 80%.
- The burden of proof that the application meets the total debt-to-value ratio requirement rests with the applicant.
- In meeting the burden of proof, the County is willing to consider appraisals done within the past year by a qualified appraiser, Assessor Proposition 8 valuations or other forms of information that clearly support the current value of the property.

Terms & Fees

- This is a revolving loan program, with a cap of \$20,000 including all fees, and subject to a simple interest rate of 1% based on outstanding quarterly principal balance.
- The following fees are required to be paid for by the landowner and are included in the \$20,000 loan cap.
 - Loan Processing Fee = \$1,400
 - Title Search Fee = \$300
 - Credit Fee = \$10
 - Reconveyance Fee = \$45
 - TOTAL FEE = \$1,755
- All loans require the landowner to sign a promissory note, secured by a recorded lien, deed of trust or similar instrument, to be repaid within 5 - 7 years, depending upon financial hardship and application review/approval. No pre-payment penalty will be applied. A late fee will be applied to past due payments.
- The lien or deed of trust recorded against the property will be released upon loan satisfaction.
- Any fees due to the title company for such services shall be added to the loan amount.



STANISLAUS COUNTY EMERGENCY DOMESTIC WATER WELL FINANCIAL ASSISTANCE PILOT PROGRAM

*This loan application will be maintained in strict confidence on file at the
Housing Authority of the County of Stanislaus*

The Stanislaus County Emergency Domestic Water Well Financial Assistance Pilot Program provides assistance to residential citizens living within the unincorporated areas of Stanislaus County to repair or replace wells that have lost their ability to pump ground water.

All Loans will be secured by a Promissory Note and Deed of Trust.

All Loans are contingent upon approval of the loan by the Stanislaus County Auditor-Controller; availability of funds; and the rules related to the funding sources being used.

All of the following items **must** be included with your Application:

- Copy of 2013 Final Federal Income Tax Return (or most current)
- Copy of Home Grant/Trust Deed
- Copy of current Social Security/SSI income verification
- Signed Fair Lending Notice Form
- Copies of two current paycheck stubs
- Signed Equal Credit Opportunity Act Form
- Copy of all other income and earnings
- Signed Credit Report Authorization and Release Form
- Copy of pension/retirement payments
- Two estimates from a certified well driller
- Copy of current mortgage statement
- Signed Application
- Copy of Homeowner's Insurance
- Copy of most recent bank statement

Please provide all of the items listed above to avoid any delay or denial of your application. If you have any questions, please contact Mary Ramirez (209) 557-2007. Deliver the completed application and required documentation to:

**Housing Authority County of Stanislaus
Emergency Domestic Well Recovery Loan Program
P.O. Box 581918
Modesto, CA 95358-0033
Attention: Mary Ramirez**



Stanislaus County Emergency Domestic Water Well Financial Assistance Pilot Program Application

*Application must be delivered to the
Housing Authority of Stanislaus County*

Please print all responses.

1701 Robertson Road, Modesto, CA 95351 (209)557-2007

<i>NAME</i>	<i>First</i>	<i>MI</i>	<i>Last</i>
<i>Street</i>			<i>Mailing Address if Different</i>
<i>City</i>	<i>State</i>		<i>Zip Code</i>
<i>Primary Number: (____) _____ - _____</i>		<i>Email: _____</i>	

Borrower and Co-Borrowers Name	Date of Birth	Relation to Applicant	Source / Type of Income	Gross Monthly Income
Borrower Name:				
Co-Borrower Name:				

Elder Preference (65 Years or older): indicate "yes" or "no"? _____

LIABILITIES/DEBT

Please list any debts you have, including credit cards, auto loans, student loans, and child-care expenses. Do NOT include utilities.

Paid To	Current Balance	Monthly Payment	Whose Debt? A=Borrower B=Co-Borrower C=Both
1.			
2.			
3.			
4.			
5.			
6.			
7.			

Please use additional sheets if necessary

SAVINGS

Please list the approximate value of the following:

BANK NAME	BORROWER	CO-BORROWERD
Checking account		
Savings account		
Cash		
Retirement account		
Other Liquid Funds		

	BORROWER		CO-BORROWER	
	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Have you ever filed for bankruptcy?</i>				
<i>If yes, date of court Judgment / Decree</i>	_____		_____	
<i>Indicate preferred payback period by checking box:</i>	<input type="checkbox"/>	<i>60 months</i>	<input type="checkbox"/>	<i>72 months</i>
	<input type="checkbox"/>		<input type="checkbox"/>	<i>84 months</i>

AUTHORIZATION

I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability and that any fraudulent claims made on this form may be grounds for prosecution under local, state, and federal law.

BORROWER

Date

CO-BORROWER

Date

OWNER'S ACCEPTANCE OF CONTRACTOR

I have carefully reviewed every bid, understand, and agree to the nature of the work to be performed on my property.

I have been informed of all aspects of the contract and all parameters of the work and acknowledge that I understand these explanations.

I was informed that no other changes will be authorized to be added to the scope of work.

By signing below, I agree to have _____
perform the authorized repairs listed in the attached bid and I authorize only the work specified on the bid and agree to this finalization.

Applicant Signature

Date

Co-Applicant Signature

Date

HOUSING AUTHORITY OF THE COUNTY OF STANISLAUS

FAIR LENDING NOTICE

To: All applicants requesting financial assistance for the repair or replacement of wells that have lost their ability to pump ground water.

It is unlawful, under the Housing Financial Discrimination Act of 1977, for a public agency to consider any of the following in determining whether or not, or under what terms and conditions, to provide or arrange for financial assistance:

1. Neighborhood characteristics (such as the average age of the homes or the income level in the neighborhood), except to a limited extent necessary to avoid an unsafe and unsound business practice.
2. Race, sex, color, religion, marital status, national origin or ancestry of applicant or tenants.

It is also unlawful to consider, in appraising a residence, the racial or religious composition of a particular neighborhood or whether or not such composition is undergoing change or is expected to undergo change.

If you wish to file a complaint, or if you have questions about your rights, contact:

Office of Fair Lending
Business and Transportation Agency
1120 N. Street
Sacramento, CA 95814
Or call collect: (916) 322-9851

If you file a complaint, the law requires that you receive a decision within thirty (30) days.

ACKNOWLEDGEMENT

I (We) received a copy of this notice.

Print Name

Print Name

Signature of Applicant

Signature of Spouse/Co-Applicant

Date

Date

HOUSING AUTHORITY OF THE COUNTY OF STANISLAUS

EQUAL CREDIT OPPORTUNITY ACT

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (providing that the applicant has the capacity to enter into a binding contract), because all or part of the applicants income derives from any public assistance program, or because the applicant has in good faith exercised any right under the consumer credit protection act.

ACKNOWLEDGEMENT

I (we) have received a copy of this receipt.

Applicant's name (Print)

Spouse/Co-Applicant (Print)

Signature of Applicant

Signature of Spouse/Co-Applicant

Date

Date

HOUSING AUTHORITY OF THE COUNTY OF STANISLAUS

CREDIT REPORT AUTHORIZATION AND RELEASE

Authorization is hereby granted to Housing Authority County of Stanislaus to obtain a standard factual data credit report through a credit agency chosen by Housing Authority County of Stanislaus.

My signature below authorizes the release of the credit reporting agency a copy of my credit application, and authorizes the credit reporting agency to obtain information regarding my employment, savings accounts, and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit union, etc). Authorization is further granted to the reporting agency to use a photo static reproduction of this authorization, if necessary, to obtain any information regarding the above mentioned information.

Applicants hereby request a copy of the credit report obtained with any possible derogatory information be sent to the address of present residence, and holds Housing Authority County of Stanislaus and any credit reporting organization harmless in so mailing the copy requested.

Any reproduction of this credit report authorization and release made by reliable means (for example, photocopy, or facsimile) is considered an original.

Borrower's Signature

Date

Borrower's Signature

Date